

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|------------|-------------|-----------------|
| FEE DETERMINATION | <i>CIS</i> | | <i>11/15/89</i> |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | <i>1800</i> | <i>12-22-93</i> |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

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| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | ✓ | ✓ |
| 2 | ✓ | ✓ | ✓ |
| 3 | ✓ | ✓ | ✓ |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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